# Case 18-81416 Doc 1 Filed 07/03/18 Entered 07/03/18 15:31:54 Desc Main Document Page 1 of 61

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS	_	
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

# Official Form 101

# Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	rt 1: Identify Yourself						
		About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):			
1.	Your full name						
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).  Bring your picture identification to your meeting with the trustee.	Terrance First name  L. Middle name  Pinkey Last name and Suffix (Sr., Jr., II, III)		Kiara First name  Danielle Middle name  Carter  Last name and Suffix (Sr., Jr., II, III)			
2.	All other names you have used in the last 8 years Include your married or maiden names.						
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-4975		xxx-xx-7144			

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Debtor 1 Terrance L. Pinkey
Debtor 2 Kiara Danielle Carter

Case number (if known)

	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs.  Business name(s)  EINs	■ I have not used any business name or EINs.  Business name(s)  EINs		
Where you live	5684 Windy Knoll Drive Loves Park. IL 61111	If Debtor 2 lives at a different address:		
	Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code		
	Winnebago			
	County	County		
	If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.		
	Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code		
Why you are choosing this district to file for bankruptcy	Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.)		
	Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names  Where you live  Why you are choosing this district to file for	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years  Include trade names and doing business as names  Business name(s)  Business name(s)  EINs  Where you live  5684 Windy Knoll Drive Loves Park, IL 61111  Number, Street, City, State & ZIP Code  Winnebago  County  If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.  Number, P.O. Box, Street, City, State & ZIP Code  Why you are choosing this district to file for bankruptcy  Check one:  Uny you are choosing this district to file for bankruptcy  I have another reason.		

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Debtor 2 Kiara Danielle Carter				Case number (if known)						
Par	t 2: Tell the Court About	Your Bankruptcy	Case							
7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.								
	choosing to file under	Chapter 7	■ Chapter 7							
		☐ Chapter 11								
		☐ Chapter 12								
		☐ Chapter 13								
8.	How you will pay the fee	about how order. If yo a pre-printe	you may pay. Typical ur attorney is submitti ed address.	lly, if you are paying the fee yo ing your payment on your beha	with the clerk's office in your local court for murself, you may pay with cash, cashier's check lif, your attorney may pay with a credit card or n, sign and attach the Application for Individua	k, or money check with				
			Fee in Installments (C		n, sign and attach the Application for individua	115 10 Fay				
		but is not re applies to	equired to, waive you our family size and y	r fee, and may do so only if yo ou are unable to pay the fee in	only if you are filing for Chapter 7. By law, a jur income is less than 150% of the official powinstallments). If you choose this option, you nial Form 103B) and file it with your petition.	erty line that				
9.	Have you filed for									
J.	bankruptcy within the	■ No.								
	last 8 years?	☐ Yes.								
		Distric		When						
		Distrio Distrio		When When	Case number Case number					
		Distric		vvnen	Case number					
10.	Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	■ No □ Yes.								
		Debto	r		Relationship to you					
		Distric	ct	When	Case number, if known					
		Debto	r		Relationship to you					
		Distric	ct	When	Case number, if known					
11.	Do you rent your	□ No. Go t	o line 12.							
	residence?	■ Yes. Has	your landlord obtaine	d an eviction judgment agains	you?					
		•	No. Go to line 12.							
			Yes. Fill out <i>Initial</i> bankruptcy petition		ludgment Against You (Form 101A) and file it	with this				

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Deb	tor 2 Kiara Danielle Car	ter		Case number (if known)
Par	Report About Any Bu	sinesses	You Own as a Sole Propri	etor
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to Part 4.	
		☐ Yes.	Name and location of bu	ısiness
	A sole proprietorship is a			
	business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if any	
	If you have more than one sole proprietorship, use a separate sheet and attach		Number, Street, City, St	ate & ZIP Code
	it to this petition.		Check the appropriate b	ox to describe your business:
			☐ Health Care Bus	iness (as defined in 11 U.S.C. § 101(27A))
			☐ Single Asset Rea	al Estate (as defined in 11 U.S.C. § 101(51B))
			☐ Stockbroker (as	defined in 11 U.S.C. § 101(53A))
			☐ Commodity Broken	ter (as defined in 11 U.S.C. § 101(6))
			☐ None of the abor	ve
13. Are you filing under Chapter 11 of the Bankruptcy Code and you a small business    Same of the Bankruptcy Code and you are small business		e a small business debtor, you must attach your most recent balance sheet, statement of		
	debtor?  For a definition of small		I am not filing under Cha	apter 11.
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapte Code.	r 11, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.	I am filing under Chapte	r 11 and I am a small business debtor according to the definition in the Bankruptcy Code.
Part	t 4: Report if You Own or	Have Any	Hazardous Property or A	ny Property That Needs Immediate Attention
14.	Do you own or have any	■ No.		
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is the hazard?	
	public health or safety? Or do you own any property that needs		If immediate attention is	
	immediate attention?		needed, why is it needed?	
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is the property?	
	argoni ropans:			Number, Street, City, State & Zip Code

Debtor 1

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Debtor 1 Terrance L. Pinkey

Debtor 2 Kiara Danielle Carter Case number (if known)

Part 5: Explain Your E

Explain Your Efforts to Receive a Briefing About Credit Counseling

#### Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

### Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. Case 18-81416 Doc 1 Filed 07/03/18 Entered 07/03/18 15:31:54 Desc Main Document Page 6 of 61

	otor 2 Kiara Danielle Car	•		Case no	umber (if known)			
Par	t 6: Answer These Questi	ions for R	eporting Purposes					
16.	What kind of debts do you have?	16a.		umer debts? Consumer debts are al, family, or household purpose."	e defined in 11 U.S.C. § 101(8) as "incurred by an			
			☐ No. Go to line 16b.					
			Yes. Go to line 17.					
		16b.	Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.					
			☐ No. Go to line 16c.					
			☐ Yes. Go to line 17.					
		16c.	State the type of debts you owe	that are not consumer debts or bu	siness debts			
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter 7. (	Go to line 18.				
	Do you estimate that after any exempt property is excluded and	■ Yes.	are paid that funds will be availa	ou estimate that after any exempt ble to distribute to unsecured cred	property is excluded and administrative expenses itors?			
	administrative expenses are paid that funds will		■ No					
	be available for distribution to unsecured creditors?		☐ Yes					
18.	How many Creditors do you estimate that you owe?	<b>1</b> -49		<b>1</b> ,000-5,000	<b>2</b> 5,001-50,000			
		□ 50-99		☐ 5001-10,000	□ 50,001-100,000			
		☐ 100-1 ☐ 200-9		□ 10,001-25,000	☐ More than100,000			
19.	How much do you	<b>\$0 - \$</b>	50.000	☐ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion			
	estimate your assets to be worth?	□ \$50,0	01 - \$100,000	□ \$10,000,001 - \$50 million	□ \$1,000,000,001 - \$10 billion			
	□ \$		001 - \$500,000 001 - \$1 million	☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 millior	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion			
20.	How much do you	□ \$0 - \$	550,000	☐ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion			
	estimate your liabilities to be?		001 - \$100,000	□ \$10,000,001 - \$50 million	□ \$1,000,000,001 - \$10 billion			
			001 - \$500,000 001 - \$1 million	☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 millior	□ \$10,000,000,001 - \$50 billion □ More than \$50 billion			
Par	t7: Sign Below							
For	you	I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.						
					gible, under Chapter 7, 11,12, or 13 of title 11, d I choose to proceed under Chapter 7.			
				ney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this s, I have obtained and read the notice required by 11 U.S.C. § 342(b).				
		I request	relief in accordance with the chap	oter of title 11, United States Code	, specified in this petition.			
I understand bankruptcy o and 3571.			cy case can result in fines up to \$2	ncealing property, or obtaining mo 250,000, or imprisonment for up to	ney or property by fraud in connection with a 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519,			
		/s/ Terra	ance L. Pinkey		nielle Carter			
			ce L. Pinkey e of Debtor 1	<b>Kiara Danie</b> Signature of D				
		Executed	don luly 2 2019	Evacuted on	luly 3 2018			
		FVECRIEC	d on July 3, 2018 MM / DD / YYYY		July 3, 2018 MM / DD / YYYY			

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Debtor 1 Terrance L. Pinke Debtor 2 Kiara Danielle Ca		Page 7 of 61	e number (if known)
For your attorney, if you are represented by one	under Chapter 7, 11, 12, or 13 of title 11, Unit	ed States Code, and have e	informed the debtor(s) about eligibility to proceed explained the relief available under each chapter debtor(s) the notice required by 11 U.S.C. § 342(b)
If you are not represented by an attorney, you do not need to file this page.			olledge after an inquiry that the information in the
	/s/ Daniel A. Springer	Date	July 3, 2018
	Signature of Attorney for Debtor		MM / DD / YYYY
	Daniel A. Springer		
	Printed name		
	Springer Law Firm		
	Firm name		
	5301 E. State Street		
	Suite 105		
	Rockford, IL 61108  Number, Street, City, State & ZIP Code		
	Contact phone <b>815.312.4725</b>	Email address	dspringerlaw@gmail.com

6314059 IL Bar number & State Case 18-81416 Doc 1 Filed 07/03/18 Entered 07/03/18 15:31:54 Desc Main

		Docume	eni Pade 8 di 61		
Fill in this infor	mation to identify your	case:			
Debtor 1	Terrance L. Pinke	ey .			
	First Name	Middle Name	Last Name		
Debtor 2	Kiara Danielle Ca	rter			
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number					
(if known)				☐ Check if this is amended filing	

# Official Form 106Sum

# **Summary of Your Assets and Liabilities and Certain Statistical Information**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		Your as	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	29,035.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	29,035.00
Par	t 2: Summarize Your Liabilities		
			<b>abilities</b> t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	20,302.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	12,441.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	51,424.36
	Your total liabilities	\$	84,167.36
Pai	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	4,018.22
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	3,963.43
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other sch	nedules.
	■ Yes What kind of debt do you have?		

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

page 1 of 2

the court with your other schedules.

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Case number (if known)

Page 9 of 61 Document Debtor 1 **Terrance L. Pinkey** Debtor 2

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

5,904.56

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

Kiara Danielle Carter

	Total clair	m
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	11,441.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	1,000.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	13,874.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	26,315.00

	C	ase 18-81416 Doc 1	L Filed 07/03/18 Document	Entered 07/03 Page 10 of 61	/18 15:31:54	Desc	Main
Fill in	this infor	rmation to identify your case a		Faue 10 01 01			
Debto	or 1	Terrance L. Pinkey					
			Middle Name	Last Name			
Debto		Kiara Danielle Carter First Name	Middle None	Loot Name			
(Spous	e, if filing)	FIRST Name	Middle Name	Last Name			
Unite	d States B	ankruptcy Court for the: NORT	HERN DISTRICT OF ILLIN	IOIS			
Case	number			-			Check if this is an amended filing
Scl n each hink it	nedu n category, t fits best.	Drm 106A/B  le A/B: Property  separately list and describe items. Be as complete and accurate as pore space is needed, attach a separately.	List an asset only once. If a ossible. If two married people	are filing together, both a	re equally responsible	for supply	ing correct
Part 1	Describe	e Each Residence, Building, Land,	or Other Real Estate You Ow	n or Have an Interest In			
Part 2 Do yo someo	u own, lea one else dr rs, vans, to	art 2. is the property? e Your Vehicles ase, or have legal or equitable ives. If you lease a vehicle, also rucks, tractors, sport utility vehicles.	report it on Schedule G: Ex			any vehicl	les you own that
3.1	Make: Model: Year: Approxima Other infor	Saturn Outlook 2008 ate mileage: 155,000 rmation:	Who has an interest in the Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 on At least one of the debtor Check if this is communications	only ors and another	the amount of any	secured cla ve Claims S he Cu po	or exemptions. Put aims on Schedule D: Secured by Property. urrent value of the ortion you own?
3.2	Make: Model: Year: Approxima	Buick Lucerne 2008 ate mileage: 155,000	Who has an interest in the Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 on At least one of the debtor	only	the amount of any	secured cla re Claims S he Cu	or exemptions. Put aims on Schedule D: Secured by Property. urrent value of the ortion you own?

Official Form 106A/B Schedule A/B: Property page 1

☐ Check if this is community property (see instructions)

\$2,875.00

\$2,875.00

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Debte Debte		Terrance L Kiara Danie			Document	age II or		number (if known)		
		Nissan						Do not deduct sec	ured clai	ms or exemptions. Put
3.3	Make:				Who has an interest in t	the property? Check one	Э	the amount of any	secured	claims on Schedule D:
	Model Year:	2017			☐ Debtor 1 only ☐ Debtor 2 only			Creditors write Ha	ve Claim	s Secured by Property.
		ximate mileage:	14,0	-	■ Debtor 1 and Debtor 2	2 only		Current value of tentire property?	the	Current value of the portion you own?
		information:			☐ At least one of the del			ciiiio piopoliyi		po
	Leas	ed Vehicle			Check if this is come (see instructions)	munity property		\$18,300	0.00	\$18,300.00
Exa	no No Yes dd the	: Boats, trailers	s, motors, perso	nal waterci	other recreational vel craft, fishing vessels, s for all of your entries at number here	snowmobiles, motorc	ng any e	entries for		\$25,375.00
Part 3	3: Des	cribe Your Pers	onal and House	hold Items	s					
Do y	ou owi	n or have any	legal or equita	ble interes	est in any of the follo	wing items?			<b>po</b> Do	ortion you own? o not deduct secured aims or exemptions.
<i>E</i> :	xample No	Id goods and s: Major applia		linens, chii	nina, kitchenware					
			Household	l Furnituı	ure				_	\$1,700.00
E	No	s: Televisions	Il phones, came	eras, media	stereo, and digital equilia players, games				ollection	ns; electronic devices
			Collection	Compu	uter, Cellphones, G	same Console, Vi	deo Gai	me	_	\$1,000.00
E)	xample No		d figurines; pain tions, memorabi		nts, or other artwork; b ctibles	ooks, pictures, or oth	ner art ob	jects; stamp, coin,	, or base	eball card collections;
E)	xample No	nt for sports as: Sports, photomusical inst	ographic, exerc	ise, and ot	other hobby equipmen	t; bicycles, pool table	es, golf clu	ubs, skis; canoes a	and kay	aks; carpentry tools;
10. <b>F</b>	irearm	s	es, shotguns, an	nmunition,	n, and related equipme	ent				

Official Form 106A/B Schedule A/B: Property page 2

☐ Yes. Describe.....

Case 18-81416 Doc 1 Filed 07/03/18 Entered 07/03/18 15:31:54 Desc Main Page 12 of 61 Document Debtor 1 Terrance L. Pinkey **Kiara Danielle Carter** Debtor 2 Case number (if known) 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories Yes. Describe..... **Used Clothing** \$300.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver Yes. Describe..... \$300.00 Jewelry 13. Non-farm animals Examples: Dogs, cats, birds, horses ■ No ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$3,300.00 for Part 3. Write that number here ..... Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ■ No □ Yes..... 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ☐ No Institution name: ■ Yes..... **BMO Harris Bank** \$180.00 17.1. Checking **Navy Federal Credit** \$180.00 Checking 17.2. **Navy Federal Credit Union** \$0.00 Checking

Official Form 106A/B Schedule A/B: Property page 3

**Navy Federal Credit Union** 

Savings

17.4.

\$0.00

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☐ Yes. Give specific information about them...

## 27. Licenses, franchises, and other general intangibles

Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

No

☐ Yes. Give specific information about them...

Money or property owed to you?

Current value of the portion you own? Do not deduct secured claims or exemptions.

		Case 18-81416	Doc 1	Filed 07/03/18 Document	Entered 07/03/18 15:31:54 Page 14 of 61	Desc Main
	ebtor 1 ebtor 2	Terrance L. Pinkey Kiara Danielle Carte	r		Case number (if known)	
	■ No	unds owed to you  Give specific information a	about them, in	cluding whether you alrea	ady filed the returns and the tax years	
	■ No		, , ,	usal support, child suppo	ort, maintenance, divorce settlement, property	settlement
	Examp  ■ No	imounts someone owes iles: Unpaid wages, disabi benefits; unpaid loans Give specific information.	lity insurance s you made to		efits, sick pay, vacation pay, workers' compe	nsation, Social Security
31.		ts in insurance policies les: Health, disability, or li	fe insurance; l	health savings account (I	HSA); credit, homeowner's, or renter's insurar	nce
	Yes. I	Name the insurance comp Con	eany of each p npany name:	olicy and list its value.	Beneficiary:	Surrender or refund value:
		Cui	rent Emplo	yer Term Life		\$0.00
33.	■ No □ Yes.  Claims Examp ■ No □ Yes.	les: Accidents, employme  Describe each claim	nether or not nt disputes, in	surance claims, or rights	t or made a demand for payment to sue g counterclaims of the debtor and rights to	o set off claims
		Describe each claim				
	■ No	ancial assets you did no Give specific information.				
36					ny entries for pages you have attached	\$360.00
Pa	rt 5: Des	scribe Any Business-Relate	d Property You	Own or Have an Interest I	n. List any real estate in Part 1.	
I	No. Go	to Part 6. o to line 38.	uitable interest	in any business-related pr	roperty?	
Pa		scribe Any Farm- and Comm ou own or have an interest in t			n or Have an Interest In.	
46.	Do you	own or have any legal of	r equitable ir	nterest in any farm- or o	commercial fishing-related property?	

Official Form 106A/B Schedule A/B: Property page 5

No. Go to Part 7.

Case 18-81416 Doc 1 Filed 07/03/18 Entered 07/03/18 15:31:54 Page 15 of 61 Document Debtor 1 Terrance L. Pinkey Debtor 2 Kiara Danielle Carter Case number (if known) ☐ Yes. Go to line 47. Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here ..... \$0.00 List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 \$0.00 Part 2: Total vehicles, line 5 56. \$25,375.00 57. Part 3: Total personal and household items, line 15 \$3,300.00 Part 4: Total financial assets, line 36 58. \$360.00 59. Part 5: Total business-related property, line 45 \$0.00 60. Part 6: Total farm- and fishing-related property, line 52 \$0.00 61. Part 7: Total other property not listed, line 54 \$0.00 62. Total personal property. Add lines 56 through 61... \$29,035.00 Copy personal property total \$29,035.00

Official Form 106A/B Schedule A/B: Property page 6

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$29,035.00

Desc Main

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Fill in this infor	mation to identify your	case:		
Debtor 1	Terrance L. Pinke	ey		
	First Name	Middle Name	Last Name	
Debtor 2	Kiara Danielle Ca	rter		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number (if known)				

# Official Form 106C

# Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
  - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
  - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own  Copy the value from Schedule A/B	rtion you own  py the value from Check only one box for each exemption.		Specific laws that allow exemption
2008 Buick Lucerne 155,000 miles Line from <i>Schedule A/B</i> : 3.2	\$2,875.00		\$2,400.00  100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(c)
2008 Buick Lucerne 155,000 miles Line from <i>Schedule A/B</i> : 3.2	\$2,875.00		\$475.00  100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
Household Furniture Line from Schedule A/B: 6.1	\$1,700.00		\$1,700.00  100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
TV, Laptop Computer, Cellphones, Game Console, Video Game Collection Line from Schedule A/B: 7.1	\$1,000.00		\$1,000.00  100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
Used Clothing Line from Schedule A/B: 11.1	\$300.00		\$300.00  100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(a)

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Terrance L. Pinkey

**Kiara Danielle Carter** Debtor 2 Case number (if known) Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B **Jewelry** 735 ILCS 5/12-1001(b) \$300.00 \$300.00 Line from Schedule A/B: 12.1 100% of fair market value, up to any applicable statutory limit **Checking: BMO Harris Bank** 735 ILCS 5/12-1001(b) \$180.00 \$180.00 Line from Schedule A/B: 17.1 100% of fair market value, up to any applicable statutory limit **Checking: Navy Federal Credit** 735 ILCS 5/12-1001(b) \$180.00 \$180.00 Line from Schedule A/B: 17.2 100% of fair market value, up to any applicable statutory limit 401(k): Current Employer 735 ILCS 5/12-1006 100% Unknown Line from Schedule A/B: 21.1 100% of fair market value, up to any applicable statutory limit 401(k): Current Employer 735 ILCS 5/12-1006 100% Unknown Line from Schedule A/B: 21.2 100% of fair market value, up to any applicable statutory limit 3. Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? Yes

Debtor 1

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		Document	Page 18	ot 61		
Fill in this information	tion to identify you	ur case:				
Debtor 1	Terrance L. Pin	kev				
	First Name	Middle Name	Last Name			
Debtor 2	Kiara Danielle (	Carter				
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Bank	ruptcy Court for the	: NORTHERN DISTRICT OF I	LLINOIS			
Case number						
(if known)					☐ Check	if this is an
					ameno	led filing
~ –						
Official Form	<u>106D</u>					
Schedule D	: Creditors	Who Have Claims	<b>Secured</b>	l by Propert	у	12/15
		If two married people are filing toge out, number the entries, and attach				
. Do any creditors ha	wa claime cacurad b	v vour proporty?				
			or achadulas. Va	u hava nathina alaa t	a rapart on this form	
_		his form to the court with your oth	er schedules. Yo	iu nave notning eise t	o report on this form.	
Yes. Fill in al	II of the information	below.				
Part 1: List All S	Secured Claims					
		more than one secured claim, list the o		Column A	Column B	Column C
		s a particular claim, list the other credit ical order according to the creditor's na		Amount of claim  Do not deduct the	Value of collateral that supports this	Unsecured portion
	are diamine in dipriduce	iodi ordor docording to the ordation of the		value of collateral.	claim	If any
2.1 Credit Acce	ptance	Describe the property that secure		\$5,786.00	\$4,200.00	\$1,586.00
Creditor's Name		2008 Saturn Outlook 155,0	00 miles			
Po Box 513		As of the date you file, the claim is	s: Check all that			
Southfield,	MI 48037	apply.  Contingent				
Number, Street, Ci	ty, State & Zip Code	☐ Unliquidated				
		☐ Disputed				
Who owes the debt	? Check one.	Nature of lien. Check all that apply	/.			
Debtor 1 only		An agreement you made (such a	s mortgage or secu	ured		
■ Debtor 2 only		car loan)				
☐ Debtor 1 and Debte	or 2 only	☐ Statutory lien (such as tax lien, m	nechanic's lien)			
At least one of the		☐ Judgment lien from a lawsuit				
Check if this claim		☐ Other (including a right to offset)				
community debt						
	Opened					
	05/18 Last					
Date debt was incurr	Active ed 6/08/18	Last 4 digits of account nu	mber 0563			
Date debt was incum		Last 4 digits of account nu				
2.2 Nissan-infin	niti I t	Describe the property that secure	s the claim:	\$14,516.00	\$18,300.00	\$0.00
Creditor's Name		2017 Nissan Rogue 14,000		Ψ11,010100	<u> </u>	40.00
		Leased Vehicle				
		As of the date you file, the claim is	Oh a ala all that			
2901 Kinwe	•	apply.	s: Check all that			
Irving, TX 7	5063	☐ Contingent				
Number, Street, Ci	ty, State & Zip Code	Unliquidated				
Who ower the deli	2 Chook and	Disputed	,			
Who owes the debt	r Uneck one.	Nature of lien. Check all that apply		d		
Debtor 1 only		An agreement you made (such a car loan)	s ποπgage or secu	urea		
■ Debtor 2 only		_				
☐ Debtor 1 and Debte	or 2 only	☐ Statutory lien (such as tax lien, m	nechanic's lien)			

☐ Judgment lien from a lawsuit

☐ At least one of the debtors and another

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Debtor 1 Terrano		ce L. Pinkey			(	Case number (if know)	
	First Name	Middle Na	ame	Last Name			
Debtor 2	Kiara Dan	ielle Carter					
	First Name	Middle Na	ame	Last Name			
	if this claim re unity debt	lates to a	Other (including a	a right to offset)			
Date debt	was incurred	Opened 07/17 Last Active 5/03/18	Last 4 digits	of account number	4064		
If this is		of your form, add	olumn A on this page the dollar value total	e. Write that number h s from all pages.	ere:	\$20,302 \$20,302	

### Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

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			Document	Page 20 of 6	31		
Fill	in this inforn	nation to identify your case:	:				
Del	btor 1	Terrance L. Pinkey					
		First Name	Middle Name	Last Name			
	btor 2	Kiara Danielle Carter					
(Spo	ouse if, filing)	First Name	Middle Name	Last Name			
Uni	ited States Ba	nkruptcy Court for the: NC	RTHERN DISTRICT OF	ILLINOIS			
Car	se number						
	nown)					☐ Check	if this is an
						amend	ded filing
<u> </u>	C - C - L	. 400E/E					
	<u>ficial Forn</u>						4044
		F/F: Creditors Who					12/15
Scho left.	edule D: Credite Attach the Con	tory Contracts and Unexpired L ors Who Have Claims Secured I Itinuation Page to this page. If y mber (if known).	by Property. If more space	is needed, copy the Part	you need, fill it out,	number the entries i	n the boxes on the
Pai	rt 1: List A	II of Your PRIORITY Unsecu	red Claims				
1.	Do any credito	ors have priority unsecured clai	ms against you?				
	☐ No. Go to P	Part 2.					
	Yes.						
2.	identify what type possible, list the	r priority unsecured claims. If a pe of claim it is. If a claim has bott e claims in alphabetical order acc than one creditor holds a particula	h priority and nonpriority amo	ounts, list that claim here a e. If you have more than tw	nd show both priority a	nd nonpriority amoun	ts. As much as
	(For an explana	ation of each type of claim, see the	e instructions for this form in	the instruction booklet.)			
					Total claim	Priority amount	Nonpriority amount
2.1	Chatara	Lvles	Last 4 digits of acc	count number	\$0.00	\$0.00	
	Priority Cre	editor's Name					
	-	st Street	When was the deb	t incurred?		-	
		rd, IL 61102 treet City State Zlp Code	As of the date you	file, the claim is: Check a	all that apply		
	Who incurred	d the debt? Check one.	☐ Contingent				
	Debtor 1 c	only	☐ Unliquidated				
	Debtor 2 c	only	☐ Disputed				
	Debtor 1 a	and Debtor 2 only	Type of PRIORITY	unsecured claim:			
	☐ At least or	ne of the debtors and another	■ Domestic suppo	rt obligations			
	☐ Check if t	his claim is for a community de	ebt  Taxes and certain	in other debts you owe the	government		
	Is the claim s	subject to offset?		or personal injury while yo			
	■ No		Other. Specify				_
	☐ Yes		• • •	Child Support			-

**Child Support** 

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Debtor 1 Terrance L. Pinkey Debtor 2 Kiara Danielle Carter		Case r	number (if know)		
2.2 Illinois Dcfs Priority Creditor's Name	Last 4 digits of account number	0100	\$11,441.00	\$11,441.00	\$0.00
509 S 6th St Springfield, IL 62701	When was the debt incurred?	Opened Active	01/15 Last 5/09/18		
Number Street City State Zlp Code	As of the date you file, the claim	is: Check a	Il that apply		
Who incurred the debt? Check one.	☐ Contingent				
■ Debtor 1 only	☐ Unliquidated				
Debtor 2 only	☐ Disputed				
☐ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured cla	im:			
☐ At least one of the debtors and another	■ Domestic support obligations				
☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Taxes and certain other debts y☐ Claims for death or personal inj		o .		
No	Other. Specify				
Yes	Family Sup	port			
.3 IRS	Last 4 digits of account number		\$1,000.00	\$1,000.00	\$0.00
Priority Creditor's Name Centralized Insolvency Operation PO Box 7346 Philadelphia, PA 19101-7346	When was the debt incurred?	2017			
Number Street City State Zlp Code	As of the date you file, the claim	is: Check a	Il that apply		
Who incurred the debt? Check one.	☐ Contingent				
☐ Debtor 1 only	☐ Unliquidated				
☐ Debtor 2 only	☐ Disputed				
■ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured cla	im:			
☐ At least one of the debtors and another	☐ Domestic support obligations				
☐ Check if this claim is for a community debt	Taxes and certain other debts y	ou owe the	government		
Is the claim subject to offset?	Claims for death or personal inj	ury while you	u were intoxicated		
■ No	☐ Other. Specify				
Yes	Tax Debt				
art 2: List All of Your NONPRIORITY Unsecu	ured Claims				
. Do any creditors have nonpriority unsecured claim	ns against you?				
☐ No. You have nothing to report in this part. Submit	this form to the court with your other	schedules.			
■ Yes.					
<ul> <li>List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each c than one creditor holds a particular claim, list the other</li> </ul>	laim. For each claim listed, identify when	nat type of cl	aim it is. Do not list claim	s already included in Par	rt 1. If more

Total claim

Part 2.

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Debtor 1 Terrance L. Pinkey

Debto	Kiara Danielle Carter		Case number (if know)				
4.1	Americollect Inc Nonpriority Creditor's Name	Last 4 digits of account number	5982	\$396.00			
	1851 S Alverno Road Manitowoc, WI 54221	When was the debt incurred?	Opened 12/17				
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply				
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	I claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not				
	No	Debts to pension or profit-sharing	g plans, and other similar debts				
	☐ Yes	■ Other. Specify Collection Definition Defi	Attorney Ihc Swedishamerican				
4.2	Americollect, Inc. Nonpriority Creditor's Name	Last 4 digits of account number		\$396.00			
	PO Box 1566 Manitowoc, WI 54221	When was the debt incurred?					
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply				
	☐ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	■ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims					
	■ No	Debts to pension or profit-sharin					
	□Yes	Other. Specify Collecting for Creditor					
4.3	Amex	Last 4 digits of account number	4573	\$436.00			
	Nonpriority Creditor's Name		Opened 04/18 Last Active				
	Po Box 297871 Fort Lauderdale, FL 33329	When was the debt incurred?	6/18/18				
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply				
	Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	Type of NONPRIORITY unsecured claim: ☐ Student loans				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts				
	Yes	■ Other. Specify Credit Card	<u> </u>				

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	1 Terrance L. Pinkey 2 Kiara Danielle Carter		Case number (if know)					
4.4	Amex	Last 4 digits of account number	5353	\$436.00				
	Nonpriority Creditor's Name  Po Box 297871  Fort Lauderdale, FL 33329  Number Street City State Zlp Code	When was the debt incurred?	Opened 03/18 Last Active 6/18/18					
	Who incurred the debt? Check one.	As of the date you file, the claim	s: Спеск ан that арру					
	☐ Debtor 1 only ☐ Debtor 2 only	☐ Contingent☐ Unliquidated						
	☐ Debtor 1 and Debtor 2 only	☐ Disputed						
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:					
	☐ Check if this claim is for a community	☐ Student loans						
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	☐ Obligations arising out of a separation agreement or divorce that you did not					
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts					
	Yes	Other. Specify Credit Card	<u> </u>					
4.5	Capital One Nonpriority Creditor's Name	Last 4 digits of account number	5542	\$1,800.00				
	15000 Capital One Dr Richmond, VA 23238	When was the debt incurred?  Opened 01/15 Last Active 3/16/18						
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply					
	☐ Debtor 1 only	☐ Contingent						
	☐ Debtor 2 only	☐ Unliquidated						
	■ Debtor 1 and Debtor 2 only	☐ Disputed						
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:					
	Check if this claim is for a community	Student loans						
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims						
	No	Debts to pension or profit-sharing						
	Yes	Other. Specify Credit Card	<u> </u>					
4.6	Capital One Nonpriority Creditor's Name	Last 4 digits of account number	8879	\$850.00				
	15000 Capital One Dr Richmond, VA 23238	When was the debt incurred?	Opened 07/15 Last Active 3/16/18					
	Number Street City State Zlp Code	As of the date you file, the claim	As of the date you file, the claim is: Check all that apply					
	Who incurred the debt? Check one.							
	Debtor 1 only	☐ Contingent	☐ Contingent					
	Debtor 2 only	☐ Unliquidated						
	Debtor 1 and Debtor 2 only	☐ Disputed						
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:					
	Check if this claim is for a community debt		ration agreement or divorce that you did not					
	Is the claim subject to offset?	report as priority claims  Debts to pension or profit-sharin	a plane, and other similar debts					
	■ No	·						
	Yes	Other. Specify Credit Card	<u> </u>					

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	1 Terrance L. Pinkey 2 Kiara Danielle Carter		Case number (if know)			
4.7	Capital One Nonpriority Creditor's Name	Last 4 digits of account number	9903	\$0.00		
	15000 Capital One Dr Richmond, VA 23238	When was the debt incurred?	Opened 12/17 Last Active 06/18			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply			
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent ☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community	☐ Disputed  Type of NONPRIORITY unsecured  ☐ Student loans	I claim:			
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not			
	■ No □ Yes	□ Debts to pension or profit-sharing  ■ Other. Specify Credit Card				
4.8	Comenitybank/victoria Nonpriority Creditor's Name	Last 4 digits of account number	3446	\$478.00		
	Po Box 182789 Columbus, OH 43218	When was the debt incurred?	Opened 11/14 Last Active 5/12/18			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	As of the date you file, the claim is: Check all that apply			
	☐ Debtor 1 only	☐ Contingent				
	■ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed  Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not			
	No	Debts to pension or profit-sharing	g plans, and other similar debts			
	Yes	Other. Specify Charge Acc	count			
4.9	Comenitycb/mypointsrwd Nonpriority Creditor's Name	Last 4 digits of account number	9271	\$164.00		
	Po Box 182120 Columbus, OH 43218	When was the debt incurred?	Opened 12/17 Last Active 5/01/18			
-	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i				
	Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	■ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community debt	<ul><li>☐ Student loans</li><li>☐ Obligations arising out of a sepa</li></ul>	ration agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims				
	No	Debts to pension or profit-sharin				
	Yes	■ Other. Specify Charge Acc	count			

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	1 Terrance L. Pinkey 2 Kiara Danielle Carter		Case number (if know)				
4.1	Convergent Outsourcing Nonpriority Creditor's Name	Last 4 digits of account number	1805	\$0.00			
	800 Sw 39th St Renton, WA 98057	When was the debt incurred?	Opened 03/14 Last Active 3/23/18				
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply				
	■ Debtor 1 only	☐ Contingent	☐ Contingent ☐ Unliquidated				
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts				
	☐ Yes	■ Other. Specify Collection	Attorney Comcast				
4.1	Credit First N A	Last 4 digits of account number	2901	\$1,103.00			
	Nonpriority Creditor's Name 6275 Eastland Rd Brookpark, OH 44142	When was the debt incurred?	Opened 07/15 Last Active 4/13/18				
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply				
	Who incurred the debt? Check one.						
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed					
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	Check if this claim is for a community	Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	aration agreement or divorce that you did not				
	No	☐ Debts to pension or profit-sharin					
	Yes	Other. Specify Charge Acc	count				
4.1	Credit One Bank Na Nonpriority Creditor's Name	Last 4 digits of account number	7704	\$344.00			
	Po Box 98875 Las Vegas, NV 89193	When was the debt incurred?	Opened 03/18 Last Active 5/13/18				
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply					
	■ Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt		aration agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims  Debts to pension or profit-sharin	a plane, and other similar debte				
	No						
	☐ Yes	Other. Specify Credit Card	1				

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Debtor 2 Kiara Danielle Carter Case number (if know) 4.1 **Creditors Protection Service** \$873.50 Last 4 digits of account number 3 Nonpriority Creditor's Name Attn: Bankruptcy Dept. When was the debt incurred? PO Box 4115 Rockford, IL 61101 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ■ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Collecting for Creditor ☐ Yes 4.1 **Crusader Clinic** \$50.00 Last 4 digits of account number Nonpriority Creditor's Name Attn: Bankruptcy Dept. When was the debt incurred? 1200 W. State St. Rockford, IL 61102 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Medical Bills ☐ Yes 4.1 **Harvard Collection Ser** 5164 \$388.00 Last 4 digits of account number 5 Nonpriority Creditor's Name 4839 N Elston When was the debt incurred? **Opened 03/18** Chicago, IL 60630 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No **Collection Attorney II Department Of** ■ Other. Specify Human Service ☐ Yes

Debtor 1 Terrance L. Pinkey

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Debtor 1 Terrance L. Pinkey Debtor 2 Kiara Danielle Carter Case number (if know) 4.1 \$390.00 **Infinity Healthcare Physicians** Last 4 digits of account number 6 Nonpriority Creditor's Name Attn: Bankruptcy Dept. When was the debt incurred? 111 E Wisconsin Ave. Suite 2000 Milwaukee, WI 53202 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ■ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Medical Bills ☐ Yes 4.1 Kohls/capone 5955 \$725.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 03/17 Last Active N56 W 17000 Ridgewood Dr When was the debt incurred? 4/13/18 Menomonee Falls, WI 53051 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ■ Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Charge Account 4.1 **Mercy Health System** \$5.236.27 Last 4 digits of account number Nonpriority Creditor's Name 1000 Mineral Point Avenue When was the debt incurred? Janesville, WI 53548 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ■ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Medical Bills  $\prod_{V \in S}$ 

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Debtor Debtor	1 Terrance L. Pinkey 2 Kiara Danielle Carter	Doddinent Tage 2	Case number (if know)				
			` ,				
4.1 9	National Credit Systems	Last 4 digits of account number	\$929.00				
	Nonpriority Creditor's Name PO Box 312125	When was the debt incurred?	When was the debt incurred?				
	Atlanta, GA 31131  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply				
	Debtor 1 only						
	Debtor 2 only	☐ Contingent					
	_	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured	d alaim.				
	At least one of the debtors and another	Student loans	d Claim.				
	☐ Check if this claim is for a community debt		ration agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts				
	Yes	Other. Specify Collecting	for Creditor				
4.2				<b>AT</b> 100 00			
0	Navy Federal Cr Union  Nonpriority Creditor's Name	Last 4 digits of account number	0326	\$5,122.00			
	•		Opened 01/18 Last Active				
	Po Box 3700 Merrifield, VA 22119	When was the debt incurred?	5/01/18				
	Number Street City State ZIp Code	As of the date you file, the claim i	s: Check all that apply				
	Who incurred the debt? Check one.						
	☐ Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	■ Debtor 1 and Debtor 2 only	□ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured					
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims					
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts				
	Yes	Other. Specify Credit Card					
4.2							
1	Navy Federal Cr Union  Nonpriority Creditor's Name	Last 4 digits of account number	<u>1710</u>	\$1,399.00			
	Po Box 3700 Merrifield, VA 22119	When was the debt incurred?	Opened 06/17 Last Active 4/27/18				
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply				
	Who incurred the debt? Check one.						
	Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	■ Debtor 1 and Debtor 2 only	☐ Disputed					
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured					
	☐ Check if this claim is for a community	Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not				
	No	report as priority claims  ☐ Debts to pension or profit-sharing plans, and other similar debts					
	□ Yes	Other. Specify Credit Card					

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	Terrance L. Pinkey  Kiara Danielle Carter	Case number (if know)		
4.2	Pediatrix Medical Group	Last 4 digits of account number	\$237.15	
	Nonpriority Creditor's Name PO Box 120153	When was the debt incurred?		
Grand Rapids, MI 49528  Number Street City State Zlp Code  Who incurred the debt? Check one.		As of the date you file, the claim is: Check all that apply		
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community debt	Student loans		
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	■ No	lacksquare Debts to pension or profit-sharing plans, and other similar debts		
	Yes	■ Other. Specify Medical Bills		
4.2				
3	Radiology Consultants of Rockford  Nonpriority Creditor's Name	Last 4 digits of account number	\$19.08	
	Attn: Bankruptcy Dept.	When was the debt incurred?		
	1401 East State Street Rockford, IL 61104			
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one.			
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	No	Debts to pension or profit-sharing plans, and other similar debts		
	Yes	■ Other Specify Medical Bills		
		_ Guidi. Growiny		
4.2	RMH Pathologists Ltd.  Nonpriority Creditor's Name	Last 4 digits of account number	\$516.75	
	c/o Professional Billing 6785 Weaver Road, Suite D	When was the debt incurred?		
	Rockford, IL 61114  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one.	The state state state in the state of the st		
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	No	☐ Debts to pension or profit-sharing plans, and other similar debts		
	□ Yes	■ Other Specify Medical Bills		
	- Onier. Specify			

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Debtor 1 Terrance L. Pinkey Debtor 2 Kiara Danielle Carter Case number (if know) 4.2 **Rockford Associated Clinical Path** \$519.00 Last 4 digits of account number 5 Nonpriority Creditor's Name Attn: Bankruptcy Dept. When was the debt incurred? PO Box 71082 Chicago, IL 60694 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ■ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Medical Bills ☐ Yes 4.2 **Rockford Health System** \$5,236.27 Last 4 digits of account number 6 Nonpriority Creditor's Name Attn: Bankruptcy Dept. When was the debt incurred? 2400 N Rockton Ave Rockford, IL 61103 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Medical Bills ☐ Yes 4.2 **Security Finance Central** 1644 \$1,664.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 4/27/18 Last Active Attn: Bankruptcy Dept. PO Box 1893 When was the debt incurred? 04/18 Spartanburg, SC 29304 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Personal Loan

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Debtor 2 Kiara Danielle Carter Case number (if know) 4.2 **State Collection Service** \$3,621.34 Last 4 digits of account number 8 Nonpriority Creditor's Name Attn: Bankruptcy Dept. When was the debt incurred? PO Box 6250 Madison, WI 53701 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ■ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Collecting for Creditor ☐ Yes 4.2 Swedish American Health System \$1,339.00 Last 4 digits of account number 9 Nonpriority Creditor's Name Attn: Bankruptcy Dept. When was the debt incurred? 1401 East State Street Rockford, IL 61104 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Medical Bills ☐ Yes 4.3 Syncb/jcp 5446 \$166.00 Last 4 digits of account number 0 Nonpriority Creditor's Name Opened 12/15 Last Active Po Box 965007 5/13/18 When was the debt incurred? Orlando, FL 32896 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ■ Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Charge Account T Yes

Debtor 1 Terrance L. Pinkey

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	or 1 Terrance L. Pinkey  Kiara Danielle Carter		Case number (if know)				
4.3 1	Syncb/toysrus	Last 4 digits of account number	3562	\$152.00			
	Nonpriority Creditor's Name Po Box 965005 Orlando, FL 32896	When was the debt incurred?	Opened 03/18 Last Active 5/13/18				
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply				
	☐ Debtor 1 only ☐ Debtor 2 only	☐ Contingent☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed  Type of NONPRIORITY unsecured  ☐ Student loans	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims					
	■ No □ Yes	□ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify Charge Account					
4.3	Syncb/walmart	Last 4 digits of account number	3755	\$354.00			
	Nonpriority Creditor's Name Po Box 965024 Orlando, FL 32896	When was the debt incurred?	Opened 06/17 Last Active 5/02/18				
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i					
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	- (1)					
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community debt  Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a sepa report as priority claims					
	■ No	☐ Debts to pension or profit-sharin					
	Yes	Other. Specify Charge Acc					
4.3	U S Dept Of Ed/GsI/AtI  Nonpriority Creditor's Name	Last 4 digits of account number	8937	\$9,108.00			
	Po Box 4222 Iowa City, IA 52244	When was the debt incurred?	Opened 01/09 Last Active 5/16/18				
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply				
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured					
	☐ Check if this claim is for a community debt  Is the claim subject to offset?	<ul><li>Student loans</li><li>Obligations arising out of a sepa report as priority claims</li></ul>					
	No	Debts to pension or profit-sharin	g plans, and other similar debts				
	☐ Yes	Other. Specify					
		Educationa	<u> </u>				

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	Kiara Danielle Carter		Case number (if know)			
4.3 4	J S Dept Of Ed/GsI/AtI	Last 4 digits of account number	8943	\$4,766.00		
F	Nonpriority Creditor's Name	When was the debt incurred?	Opened 01/09 Last Active 5/16/18			
1	owa City, IA 52244  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim		-		
ı	Debtor 1 only  Debtor 2 only	☐ Contingent☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another	☐ Disputed  Type of NONPRIORITY unsecured	d claim:			
c	☐ Check if this claim is for a community lebt s the claim subject to offset?	<ul><li>■ Student loans</li><li>□ Obligations arising out of a separeport as priority claims</li></ul>				
_	No	☐ Debts to pension or profit-sharing plans, and other similar debts				
L	Yes	Other. Specify	ıl	-		
4.3 5	Norld Finance Company	Last 4 digits of account number	3301	\$2,210.00		
F	Nonpriority Creditor's Name PO Box 6429 Greenville, SC 29606	When was the debt incurred?	Opened 04/14 Last Active 12/31/14			
1	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
_	■ Debtor 1 only □ Debtor 2 only	☐ Contingent ☐ Unliquidated				
_	Debtor 1 and Debtor 2 only	☐ Disputed				
[	At least one of the debtors and another  Type of NONPRIORITY unsecured claim:					
c	☐ Check if this claim is for a community lebt sthe claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not			
ı	No	Debts to pension or profit-sharin	g plans, and other similar debts			
[	☐Yes	Other. Specify Personal Lo	oan	-		
Part 3:	List Others to Be Notified About a De	ebt That You Already Listed				
is trying have m	page only if you have others to be notified g to collect from you for a debt you owe to s ore than one creditor for any of the debts th for any debts in Parts 1 or 2, do not fill out	omeone else, list the original creditor in at you listed in Parts 1 or 2, list the addi	Parts 1 or 2, then list the collection agenc	y here. Similarly, if you		
		_	list the original creditor?  Part 1: Creditors with Priority Unsecured Cla  Part 2: Creditors with Nonpriority Unsecured			
Manito	woc, WI 54221	Last 4 digits of account number	Fait 2. Creditors with Nonphority Onsecured	Ciairis		
			list the original creditor?  Part 1: Creditors with Priority Unsecured Cla Part 2: Creditors with Nonpriority Unsecured			
		Last 4 digits of account number				
Part 4:	Add the Amounts for Each Type of U	Insecured Claim				
	e amounts of certain types of unsecured cla unsecured claim.	aims. This information is for statistical re	eporting purposes only. 28 U.S.C. §159. Ad	d the amounts for each		
6a. Domestic support obligations		ns	Total Claim  6a. \$ 11,441.00	-		

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Debtor 1 Terrance L. Pinkey Debtor 2 Kiara Danielle Carter Case number (if know) claims from Part 1 Taxes and certain other debts you owe the government 6b. 1,000.00 6c. Claims for death or personal injury while you were intoxicated 6c. 0.00 6d. Other. Add all other priority unsecured claims. Write that amount here. 6d. 0.00 Total Priority. Add lines 6a through 6d. 6e. 12,441.00 Total Claim Student loans 6f. 6f. 13,874.00 Total claims Obligations arising out of a separation agreement or divorce that from Part 2 0.00 6g. you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts 6h. 0.00 Other. Add all other nonpriority unsecured claims. Write that amount 37,550.36 Total Nonpriority. Add lines 6f through 6i. 6j. 51,424.36 Case 18-81416 Doc 1 Filed 07/03/18 Entered 07/03/18 15:31:54 Desc Main

			11 1100. 00 01 01	
Fill in this infor	mation to identify your	case:		
Debtor 1	Terrance L. Pinke	е <b>у</b>		
	First Name	Middle Name	Last Name	
Debtor 2	Kiara Danielle Ca	irter		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(II KIIOWII)				

# Official Form 106G

# **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code

State what the contract or lease is for

2.1 Nissan-infiniti Lt 2901 Kinwest Pkwy Irving, TX 75063 2017 Nissan Rogue lease, \$558.31/month

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		Docum	ent Page 36 d	of 61	
Fill in this	information to identify your	r case:			
Debtor 1	Terrance L. Pink	ey			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filin	Kiara Danielle C	Middle Name	Last Name		
	3,				
United Stat	tes Bankruptcy Court for the:	NORTHERN DISTRIC	T OF ILLINOIS		
Case numb	per				
(if known)					Check if this is an
					amended filing
Official	Form 106H				
	ule H: Your Cod	lobtors			40/45
Scried	ule n. Your Coc	ientoi 2			12/15
our name	and case number (if known you have any codebtors? (if	n). Answer every questio	n.	o this page. On the top of any Add	<b>5</b> ,
■ No					
☐ Yes					
				y? (Community property states and	territories include
Arizona	a, California, Idaho, Louisiana	a, Nevada, New Mexico, P	uerto Rico, Texas, Wash	ington, and Wisconsin.)	
■ No.	Go to line 3.				
☐ Yes	. Did your spouse, former spo	ouse, or legal equivalent liv	ve with you at the time?		
in line Form 1	2 again as a codebtor only	if that person is a guara	ntor or cosigner. Make	if your spouse is filing with you. sure you have listed the creditor ( 6G). Use Schedule D, Schedule E	on Schedule D (Official
	Column 1: Your codebtor			Column 2: The creditor to wh	om you owe the debt
N	Name, Number, Street, City, State and 2	ZIP Code		Check all schedules that apply	
3.1				☐ Schedule D. line	
	Name			☐ Schedule E/F, line	
				☐ Schedule G, line	
1	Number Street			_	
(	City	State	ZIP Code		
3.2				□ Schodulo D. line	
	Name			□ Schedule D, line □ Schedule E/F, line	
				☐ Schedule G, line	
-	Number Street			<i>,</i> ———	
	City	State	ZIP Code		

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Fill in this information	tion to identify your case:	
Debtor 1	Terrance L. Pinkey	
Debtor 2 (Spouse, if filing)	Kiara Danielle Carter	
United States Bar	nkruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS	
Case number (If known)		Check if this is:  An amended filing A supplement showing postpetition chapter
Official Fo	<del></del>	13 income as of the following date:  MM / DD/ YYYY
Allibados	I. Your Income	10

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Employmen	t			
. Fill in your employment information.		Debtor 1	Debtor 2 or non-filing spouse	
If you have more than one job,	Employment status	■ Employed	■ Employed	
attach a separate page with information about additional	Employment status	☐ Not employed	☐ Not employed	
employers.	Occupation	Assembly	CNA	
Include part-time, seasonal, or self-employed work.	Employer's name	Magna Exteriors Belvidere	Mercy Health System	
Occupation may include studer or homemaker, if it applies.	t Employer's address	675 Corporate Parkway Belvidere, IL 61008	1000 Mineral Point Avenue Janesville, WI 53548	
	How long employed to	here? 1 year	10 months	

Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

For Debtor 1

For Debtor 2 or

0.00

non-filing spouse List monthly gross wages, salary, and commissions (before all payroll 4,017.61 2,086.50 deductions). If not paid monthly, calculate what the monthly wage would be. Estimate and list monthly overtime pay. 3. 0.00 +\$ Calculate gross Income. Add line 2 + line 3. 4,017.61 2,086.50

Official Form 106I Schedule I: Your Income page 1

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	tor 1 tor 2	Terrance L. Pinkey Kiara Danielle Carter	=	(	Case i	number (if	known)				
	Con	y line 4 here	4.		For \$	Debtor 1	17.61		Debtor 2 or n-filing spou 2.086	se	
	OOP	y line 4 nere	٠.		Ψ	7,0	17.01	Ψ_	2,000	.50	
5.	List	all payroll deductions:									
	5a.	Tax, Medicare, and Social Security deductions	5a.		\$	83	35.08	\$	244	.83	
	5b.	Mandatory contributions for retirement plans	5b.		\$		0.00	\$_		.00	
	5c.	Voluntary contributions for retirement plans	5c.		\$		0.00	\$_		.00	
	5d. 5e.	Required repayments of retirement fund loans Insurance	5d. 5e.		\$	4.	0.00	\$_ \$		.00	
	5f.	Domestic support obligations	5f.		\$ _		38.67 19.91	- \$ \$	322	.00	
	5g.	Union dues	5g.		\$	J	0.00	\$_		.00	
	5h.	Other deductions. Specify: Life Insurance	5h.		\$		9.40	+ \$		.17	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$	1,50	3.06	\$	582	.83	
7.	Cald	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$	2,51	4.55	\$	1,503	.67	
8.	8b. 8c. 8d. 8e. 8f. 8g. 8h.	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.  Interest and dividends  Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  Unemployment compensation  Social Security  Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:  Pension or retirement income  Other monthly income. Specify:	8c. 8d. 8e.		\$ \$ \$ \$ \$ \$		0.00 0.00 0.00 0.00 0.00 0.00 0.00	\$_ \$_ \$_ \$_ + \$_	0 0 0 0	.00 .00 .00 .00 .00	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	5	\$		0.00	\$_		0.00	
10.	Cald	culate monthly income. Add line 7 + line 9.	10.	\$	2	2,514.55	s + \$	1,	503.67 = \$	4	,018.22
	Add	the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.				•					•
11.	Inclu othe	e all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your refriends or relatives. not include any amounts already included in lines 2-10 or amounts that are not cify:	depe			•			Schedule J. 11. +\$		0.00
12.		the amount in the last column of line 10 to the amount in line 11. The reset that amount on the Summary of Schedules and Statistical Summary of Certailes							12. \$	4 mbine	.,018.22 d
13.	Do y ■	you expect an increase or decrease within the year after you file this form No. Yes. Explain:	?								ncome

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						Ī		
3111	in this informa	tion to identify yo	our case:					
Debt	tor 1	Terrance L. I	Pinkey			Che	ck if this is:	
Dob	tor 2	Kiere Deviel	la Cantan				An amended filing	uing postpotition shorter
	ouse, if filing)	Kiara Daniel	ie Carter				13 expenses as of	wing postpetition chapter the following date:
``		uptcy Court for the	: NORTH	IERN DISTRICT OF ILLIN	IOIS		MM / DD / YYYY	
	e number nown)							
Ľ								
Of	fficial Fo	rm 106J						
Sc	chedule	J: Your	Exper	ises				12/1
Be a	as complete ormation. If m	and accurate as	possible eded, atta	. If two married people ar ich another sheet to this				
Part		ibe Your House	hold					
1.	Is this a joir  ☐ No. Go to							
	_		in a canar	ate household?				
			iii a sepai	ate nousenoid?				
	■ N □ Y	_	st file Offici	al Form 106J-2, <i>Expenses</i>	s for Separate House	ehold of Deb	otor 2.	
2.	Do you have	e dependents?	□ No					
	Do not list D Debtor 2.	ebtor 1 and	■ Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state	the						□ No
	dependents				Daughter		_ 1	Yes
							_	□ No
					Daughter		_ 1	Yes
					Doughtor		7	□ No
					Daughter			■ Yes
								□ No □ Yes
3.	expenses o	oenses include f people other t d your depende	han 👝	No Yes				Li res
Part	f 2: Estim	ate Your Ongoi	na Month	ly Evnoncos				
Esti exp	imate your ex	cpenses as of ye	our bankr	uptcy filing date unless y y is filed. If this is a supp	ou are using this for the dule	orm as a si J, check t	upplement in a Cha he box at the top o	apter 13 case to report f the form and fill in the
the		h assistance an		government assistance i cluded it on <i>Schedule I:</i> \			Your exp	enses
4.		or home owners and any rent for th		ses for your residence. I or lot.	nclude first mortgage	e 4. \$	\$	575.00
	If not includ	led in line 4:						
	4a. Real e	estate taxes				4a. S	\$	0.00
		rty, homeowner's	s, or renter	's insurance		4b.	·	0.00
	4c. Home	maintenance, re	epair, and ι	upkeep expenses		4c.	·	0.00
	4d. Home	owner's associat	tion or con-	dominium dues		4d. \$	\$	0.00

0.00

5. Additional mortgage payments for your residence, such as home equity loans

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Debtor 2		e L. Pinkey anielle Carter	Casa num	har (if known)		
Deptor 2	Z Niara Di	anielle Carter	Case num	ber (if known)		
6. <b>Ut</b> i	ilities:					
6a	. Electricity	r, heat, natural gas	6a.	\$	114.00	
6b	. Water, se	ewer, garbage collection	6b.	\$	0.00	
6c	. Telephon	e, cell phone, Internet, satellite, and cable services	6c.	\$	280.00	
6d	I. Other. Sp	ecify:	6d.	\$	0.00	
7. Fo		sekeeping supplies	7.	\$	850.00	
		children's education costs	8.	\$	143.00	
). Cle	othing, laund	dry, and dry cleaning	9.	\$	300.00	
	-	products and services	10.	\$	75.00	
1. <b>M</b> e	edical and de	ental expenses	11.	\$	65.00	
		Include gas, maintenance, bus or train fare.		•	<del></del>	
		car payments.	12.	\$	350.00	
3. <b>En</b>	ntertainment,	clubs, recreation, newspapers, magazines, and books	13.	\$	75.00	
4. Ch	naritable con	tributions and religious donations	14.	\$	0.00	
5. <b>Ins</b>	surance.					
		nsurance deducted from your pay or included in lines 4 or 2				
	ia. Life insur		15a.	•	0.00	
15	b. Health in:	surance	15b.	\$	0.00	
15	ic. Vehicle ir	nsurance	15c.	\$	295.36	
15	d. Other ins	urance. Specify:	15d.	\$	0.00	
6. <b>Ta</b>	<b>ixes.</b> Do not i	nclude taxes deducted from your pay or included in lines 4	or 20.			
	ecify:		16.	\$	0.00	
		lease payments:				
		nents for Vehicle 1	17a.	·	558.31	
	. ,	nents for Vehicle 2	17b.	·	232.76	
	c. Other. Sp		17c.	\$	0.00	
17	d. Other. Sp	pecify:	17d.	\$	0.00	
		s of alimony, maintenance, and support that you did no		•	0.00	
		your pay on line 5, Schedule I, Your Income (Official Fo		\$		
		s you make to support others who do not live with you		\$	0.00	
	ecify:	and a summary and broken dead to those A and B of this farms	19.			
		perty expenses not included in lines 4 or 5 of this form			0.00	
		s on other property	20a.		0.00	
	b. Real esta		20b.	·	0.00	
		homeowner's, or renter's insurance	20c.		0.00	
		nce, repair, and upkeep expenses	20d.	·	0.00	
_		ner's association or condominium dues	20e.	·	0.00	
1. <b>O</b> t	her: Specify:	Birthdays/Holidays/Haircuts	21.	+\$	50.00	
2 Ca	alculate vour	monthly expenses				
	a. Add lines	•		\$	3,963.43	
		22 (monthly expenses for Debtor 2), if any, from Official For	m 106.l-2	\$	3,303.43	
			111 1000-2		0.000.40	
22	c. Add line 22	2a and 22b. The result is your monthly expenses.		\$	3,963.43	
3. <b>Ca</b>	alculate your	monthly net income.				
23	a. Copy line	12 (your combined monthly income) from Schedule I.	23a.	\$	4,018.22	
		r monthly expenses from line 22c above.	23b.	-\$	3,963.43	
					3,0000	
23	c. Subtract	your monthly expenses from your monthly income.			54.70	
	The resul	t is your monthly net income.	23c.	\$	54.79	
			<b>.</b> . <b></b>			
	Do you expect an increase or decrease in your expenses within the year after you file this form?  For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease or decrease.					
		ou expect to finish paying for your car loan within the year or do you e terms of your mortgage?	a expect your mortgage	payment to increase	or decrease decause of a	
	No.	Come of your mongage:				
		[Fig. 1]				
	Yes.	Explain here:				

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Fill in this infor	rmation to identify your	case:			
Debtor 1	•				
Deptor 1	Terrance L. Pinke	Middle Name	Last Name		
Debtor 2	Kiara Danielle Ca	rter			
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States B	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number					
(if known)				☐ Check if this is an amended filing	
	tion About a		Debtor's Sche		2/15
obtaining mone years, or both. 1		n connection with a ban		ring a false statement, concealing property, one was up to \$250,000, or imprisonment for up to	
Did you pa	ay or agree to pay some	one who is NOT an atto	rney to help you fill out bankro	uptcy forms?	
☐ Yes.	Name of person			Attach Bankruptcy Petition Preparer's Note Declaration, and Signature (Official Form	
	alty of perjury, I declare re true and correct.	that I have read the sum	nmary and schedules filed with	h this declaration and	
X /s/ Ter	rrance L. Pinkey		X /s/ Kiara Daniel	lle Carter	
	nce L. Pinkey ure of Debtor 1		Kiara Danielle ( Signature of Debto		
Date	July 3, 2018		Date July 3, 2	2018	

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Fill	l in this inform	ation to identify you	r case:						
De	btor 1	Terrance L. Pink							
De	btor 2	First Name  Kiara Danielle C	Middle Nar	ne	La	st Name			
	ouse if, filing)	First Name	Middle Nar	ne	La	st Name			
Un	ited States Ban	kruptcy Court for the:	NORTHERN	DISTRICT OF	F ILLINC	OIS			
Ca	se number								
l	nown)							_	heck if this is an mended filing
	fficial For	m 107 of Financial	Affairs for	· Individ	uals	Filing for E	Bankruptcy		4/10
info nun	ormation. If months in the mon	nd accurate as possione space is needed, b. Answer every questable.	attach a separa stion.	te sheet to th	his form	. On the top of ar			
1.	What is your	current marital statu	ıs?						
	■ Married □ Not marri	ed							
2.	During the las	st 3 years, have you	lived anywhere	other than w	vhere yo	u live now?			
	□ No ■ Yes. List	all of the places you l	ived in the last 3	years. Do not	t include	where you live no	w.		
	Debtor 1 Price	or Address:		es Debtor 1 d there		Debtor 2 Prior A	ddress:		Dates Debtor 2 lived there
	1436 Grant Rockford, I			n-To: <b>)15 - 11/201</b>	5	Same as Debtor	1		Same as Debtor 1 From-To:
<b>3.</b> stat	es and territorie	et <b>8 years, did you e</b> v s include Arizona, Ca de sure you fill out <i>Scl</i>	lifornia, Idaho, Lo	ouisiana, Neva	ada, Nev	w Mexico, Puerto F	,, , ,	,	? (Community property fisconsin.)
Pa	rt 2 Explain	the Sources of You	r Income						
4.	Fill in the total	any income from en amount of income yo a joint case and you	u received from a	all jobs and all	ll busines	sses, including par	t-time activities.	∕ious caler	ıdar years?
	□ No ■ Yes. Fill i	n the details.							
			Debtor 1				Debtor 2		
			Sources of inc			income e deductions and ions)	Sources of inco		Gross income (before deductions and exclusions)
		f current year until for bankruptcy:	■ Wages, combonuses, tips	missions,		\$21,324.34	■ Wages, common bonuses, tips	nissions,	\$12,496.00
			☐ Operating a	business			☐ Operating a b	usiness	
Offic	cial Form 107		Statement of	Financial Affai	irs for Inc	dividuals Filing for I	Bankruptcy		page '

page 1

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Terrance L. Pinkey

De	btor 2 <b>Ki</b>	ara Daniel	le Carter		Cas	e number (if known)		
				Debtor 1		Debtor 2		
				Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of inc Check all that a		Gross income (before deductions and exclusions)
	r last caler inuary 1 to	ndar year: December	31, 2017 )	■ Wages, commissions, bonuses, tips	\$34,880.00	■ Wages, combonuses, tips	ımissions,	\$15,713.00
				☐ Operating a business		☐ Operating a	business	
		dar year be December		■ Wages, commissions, bonuses, tips	\$27,000.00	■ Wages, combonuses, tips	ımissions,	\$27,000.00
				☐ Operating a business		☐ Operating a	business	
	List each		he gross inc	se and you have income that yome from each source separa	_	-		
				Debtor 1		Debtor 2		
				Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of inc Describe below		Gross income (before deductions and exclusions)
Pa	rt 3: Lis	t Certain Pa	vments You	Made Before You Filed for	Bankruptcy			
	□ No.	Neither De individual puring the No. Yes	90 days before 30 day	each creditor to whom you pai reditor. Do not include paymer payments to an attorney for the ton 4/01/19 and every 3 year or both have primarily consu- pre you filed for bankruptcy, di	Imer debts. Consumer debtald purpose."  Indicate you pay any creditor a total dayou pay any c	in one or more pay gations, such as ch or after the date of all of \$600 or more?	re?  ments and the support and	he total amount you ind alimony. Also, do
	Creditor	's Name and	d Address	Dates of payme	ent Total amount paid	Amount you still owe	Was this p	payment for
	PO Box	Acceptance : 5070 eld, MI 480	-	4/2018 - 6/201	8 \$698.28	\$5,786.00	☐ Mortgaç ☐ Car ☐ Credit (☐ Loan Ri ☐ Supplie ☐ Other_	Card epayment rs or vendors

Debtor 1

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	Tamanas I. Bialasa	Document	-aye 44 01 01			
	otor 1 Terrance L. Pinkey otor 2 Kiara Danielle Carter		Cas	e number (if known)		
	Creditor's Name and Address	Dates of payment	Total amount	Amount you still owe	Was this pa	yment for
	Nissan-infiniti Lt 2901 Kinwest Pkwy Irving, TX 75063	4/2018 - 6/2018	paid \$1,674.93	\$14,516.00	☐ Mortgage ■ Car ☐ Credit Ca ☐ Loan Rep ☐ Suppliers ☐ Other	rd payment
7.	Within 1 year before you filed for bankrupt Insiders include your relatives; any general part of which you are an officer, director, person in a business you operate as a sole proprietor. It alimony.	artners; relatives of any ger n control, or owner of 20% o	eral partners; partner or more of their voting	erships of which you g securities; and an	u are a genera ly managing aç	I partner; corporation gent, including one fo
	No No					
	Yes. List all payments to an insider.					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
8.	Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cos  No Yes. List all payments to an insider Insider's Name and Address		Total amount	Amount you still owe		this payment
Par	t 4: Identify Legal Actions, Repossession	ns, and Foreclosures	pula	Still Owe	inolade oreal	ioi o namo
9.	Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes.  No Yes. Fill in the details.	tcy, were you a party in ar				
	Case title Case number	Nature of the case	Court or agency		Status of the	e case
10.	Within 1 year before you filed for bankrupt Check all that apply and fill in the details belo  No. Go to line 11.  Yes. Fill in the information below.  Creditor Name and Address			oreclosed, garnisi	ned, attached	, seized, or levied? Value of the property
11.	Within 90 days before you filed for bankrul accounts or refuse to make a payment bed  No Yes. Fill in the details.	cause you owed a debt?				mounts from your
	Creditor Name and Address	Describe the action the	creditor took	Date a taken	action was	Amount
12.	Within 1 year before you filed for bankrupt court-appointed receiver, a custodian, or a  No Yes		erty in the possessi			fit of creditors, a

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	otor 1 Terrance L. Pinkey otor 2 Kiara Danielle Carter	Case number	(if known)				
Par	t 5: List Certain Gifts and Contributions						
13.	■ No	, did you give any gifts with a total value of more t	han \$600 per person	?			
	Yes. Fill in the details for each gift.	<b>5</b>					
	Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value			
	Person to Whom You Gave the Gift and Address:						
14.	Within 2 years before you filed for bankruptcy ■ No	, did you give any gifts or contributions with a tota	al value of more than	\$600 to any charity?			
	☐ Yes. Fill in the details for each gift or contrib	ution.					
	Gifts or contributions to charities that total more than \$600 Charity's Name	Describe what you contributed	Dates you contributed	Value			
	Address (Number, Street, City, State and ZIP Code)						
Par	t 6: List Certain Losses						
	Within 1 year before you filed for bankruptcy or gambling?  ■ No □ Yes. Fill in the details.	or since you filed for bankruptcy, did you lose any	thing because of the	ft, fire, other disaster,			
		cribe any insurance coverage for the loss	Date of your	Value of property			
	how the loss occurred Inclu	de the amount that insurance has paid. List pending ance claims on line 33 of Schedule A/B: Property.	loss	lost			
Par	t 7: List Certain Payments or Transfers						
16.	Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition?  Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.						
	□ No						
	Yes. Fill in the details.						
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and value of any property transferred	Date payment or transfer was made	Amount of payment			
	Springer Law Firm 5301 East State Street, Suite 105	\$600.00	6/22/2018	\$600.00			
17.	Springer Law Firm 5301 East State Street, Suite 105 Rockford, IL 61107  Within 1 year before you filed for bankruptcy, promised to help you deal with your creditors Do not include any payment or transfer that you li  No Yes. Fill in the details.	did you or anyone else acting on your behalf pay or to make payments to your creditors? sted on line 16.	or transfer any prope	rty to anyone who			
	Person Who Was Paid Address	Description and value of any property transferred	Date payment or transfer was made	Amount of payment			

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Terrance L. Pinkey **Kiara Danielle Carter** Debtor 2

Case number (if known)

18.	Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.  No  Yes. Fill in the details.							
	Person Who Received Transfer Address  Person's relationship to you	Description and v property transfer		Describe any property payments received or paid in exchange				
19.	Within 10 years before you filed for bankrup beneficiary? (These are often called asset-pro ■ No □ Yes. Fill in the details.		y property to a so	elf-settled trust or similar	device of which you are a			
	Name of trust	Description and v	alue of the prope	erty transferred	Date Transfer was made			
	Within 1 year before you filed for bankrupto sold, moved, or transferred? Include checking, savings, money market, houses, pension funds, cooperatives, asso No	cy, were any financial ac or other financial accour	counts or instrur	nents held in your name,	•			
	☐ Yes. Fill in the details.  Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	· .		vas Last balance before closing or transfer			
21.	Do you now have, or did you have within 1 cash, or other valuables?  No	year before you filed for	bankruptcy, any	safe deposit box or othe	r depository for securities,			
	☐ Yes. Fill in the details.  Name of Financial Institution  Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		escribe the contents	Do you still have it?			
22.	Have you stored property in a storage unit  No Yes. Fill in the details.	,	home within 1 ye	ear before you filed for ba	ankruptcy?			
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, S State and ZIP Code)		escribe the contents	Do you still have it?			
Par	t 9: Identify Property You Hold or Control	I for Someone Else						
23.	Do you hold or control any property that so for someone.  No Yes. Fill in the details.	omeone else owns? Inclu	ude any property	you borrowed from, are s	storing for, or hold in trust			
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		escribe the property	Value			
	t 10: Give Details About Environmental Inf	formation						

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or Statement of Financial Affairs for Individuals Filing for Bankruptcy

Official Form 107

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toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or

**Terrance L. Pinkey** Debtor 1 Debtor 2 **Kiara Danielle Carter** 

Case number (if known)

	regulations controlling the cleanup of these	e substances, wastes, or material.							
	to own, operate, or utilize it, including disposal sites.								
	Hazardous material means anything an envi hazardous material, pollutant, contaminant		waste, hazardous substance, toxic	substance,					
Rep	ort all notices, releases, and proceedings th	at you know about, regardless of when	they occurred.						
24.	Has any governmental unit notified you tha	t you may be liable or potentially liable	under or in violation of an environm	ental law?					
	■ No								
	Yes. Fill in the details.								
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice					
25.	Have you notified any governmental unit of	any release of hazardous material?							
	■ No □ Yes. Fill in the details.								
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice					
26.	Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.								
	■ No								
	Yes. Fill in the details.								
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case					
Par	t 11: Give Details About Your Business or	Connections to Any Business							
27.	Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?								
	☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time								
	☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)								
	☐ A partner in a partnership								
	☐ An officer, director, or managing executive of a corporation								
	☐ An owner of at least 5% of the voting or equity securities of a corporation								
	No. None of the above applies. Go to Part 12.								
	Yes. Check all that apply above and fil	I in the details below for each business	·•						
	Business Name Address (Number, Street, City, State and ZIP Code)	Describe the nature of the business	Employer Identification number Do not include Social Security						
	(Number, Sireet, City, State and 21r Code)	Name of accountant or bookkeeper	Dates business existed						
28.	Within 2 years before you filed for bankrup institutions, creditors, or other parties.	tcy, did you give a financial statement t	o anyone about your business? Incl	ude all financial					
	■ No □ Yes. Fill in the details below.								
	Name Address	Date Issued							

Part 12: Sign Below

(Number, Street, City, State and ZIP Code)

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**Terrance L. Pinkey** Debtor 1 Debtor 2 **Kiara Danielle Carter** Case number (if known) are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Terrance L. Pinkey /s/ Kiara Danielle Carter Terrance L. Pinkey Kiara Danielle Carter Signature of Debtor 1 Signature of Debtor 2 Date July 3, 2018 Date July 3, 2018 Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms? ☐ Yes. Name of Person \_\_\_\_\_. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Debtor 1	Terrance L. Pinke	ey		
	First Name	Middle Name	Last Name	
Debtor 2	Kiara Danielle Ca	rter		
Spouse if, filing)	First Name	Middle Name	Last Name	
Case number	ankruptcy Court for the:	NORTHERN DISTRICT	OT ILLINOIS	
(if known)				Check if this is a amended filing

#### Official Form 108

### Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

#### Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's Credit Acceptance	☐ Surrender the property. ☐ Retain the property and redeem it.	□ No
Description of property securing debt:  2008 Saturn Outlook 155,000 miles	■ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]:	■ Yes
Creditor's Nissan-infiniti Lt	■ Surrender the property.	□No
name:  Description of property  Securing debt:  2017 Nissan Rogue 14,000 miles Leased Vehicle	<ul> <li>□ Retain the property and redeem it.</li> <li>□ Retain the property and enter into a Reaffirmation Agreement.</li> <li>□ Retain the property and [explain]:</li> </ul>	■ Yes

#### Part 2: List Your Unexpired Personal Property Leases

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Describe your unexpired personal property leases

Will the lease be assumed?

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Debtor 1 Terrance L. Pinkey Debtor 2 Kiara Danielle Carter			Case number (if known)
Les	sor's name:	Nissan-infiniti Lt	■ No
			<b>—</b> 140
			☐ Yes
	scription of leased perty:	2017 Nissan Rogue lease,	\$558.31/month
Par	t 3: Sign Below		
		rry, I declare that I have indicate ct to an unexpired lease.	ed my intention about any property of my estate that secures a debt and any personal
X	/s/ Terrance L.	Pinkey	X /s/ Kiara Danielle Carter
	Terrance L. Pir	nkey	Kiara Danielle Carter
	Signature of Debt	or 1	Signature of Debtor 2
	Date July 3	3, 2018	Date <b>July 3, 2018</b>

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure</a>.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

### Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit</a>
AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 18-81416 Doc 1 Filed 07/03/18 Entered 07/03/18 15:31:54 Desc Main Document Page 55 of 61

B2030 (Form 2030) (12/15)

### **United States Bankruptcy Court**Northern District of Illinois

In r	Terrance L. Pinkey  Kiara Danielle Carter		Case No				
	Mara Damene Garter	Debtor(s)	Chapter	7			
	DISCLOSURE OF COMP	ENSATION OF ATTO	RNEY FOR D	EBTOR(S)			
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 20 compensation paid to me within one year before the fibe rendered on behalf of the debtor(s) in contemplation	iling of the petition in bankruptcy.	, or agreed to be pai	d to me, for servi			
	For legal services, I have agreed to accept		\$	600.00	_		
	Prior to the filing of this statement I have received	ed	\$	600.00	_		
				0.00	-		
2.	The source of the compensation paid to me was:						
	■ Debtor □ Other (specify):						
3.	The source of compensation to be paid to me is:						
	■ Debtor □ Other (specify):						
4.	■ I have not agreed to share the above-disclosed con	mpensation with any other person	unless they are men	mbers and associa	ates of my law firm.		
	☐ I have agreed to share the above-disclosed compe copy of the agreement, together with a list of the				f my law firm. A		
5.	In return for the above-disclosed fee, I have agreed to	n return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:					
	<ul> <li>a. Analysis of the debtor's financial situation, and ref</li> <li>b. Preparation and filing of any petition, schedules, s</li> <li>c. Representation of the debtor at the meeting of cred</li> <li>d. [Other provisions as needed]</li> <li>Negotiations with secured creditors to reaffirmation agreements and applications of the secured creditors to reaffirmation agreements and applications.</li> </ul>	tatement of affairs and plan which ditors and confirmation hearing, and o reduce to market value; ex- tions as needed; preparation	n may be required; and any adjourned he emption planning	earings thereof;	and filing of		
6.	By agreement with the debtor(s), the above-disclosed Representation of the debtors in any any other adversary proceeding.	fee does not include the following dischargeability actions, judi	g service: I <b>cial lien avoidan</b>	ces, relief fron	າ stay actions or		
		CERTIFICATION					
this	I certify that the foregoing is a complete statement of bankruptcy proceeding.	any agreement or arrangement for	r payment to me for	representation of	f the debtor(s) in		
_•	July 3, 2018	/s/ Daniel A. Spri					
_	Date	Daniel A. Springe Signature of Attorne Springer Law Fir 5301 E. State Stre Suite 105 Rockford, IL 6110 815.312.4725 dspringerlaw@g	er ey m eet				
		815.312.4725			_		

Springer Law Firm

5301 East State Street Suite 105, Rockford, IL

815.312.4275

#### **CHAPTER 7 RETAINER AGREEMENT**

The undersigned agrees to hire Springer Law Firm to represent the undersigned in a Chapter 7 bankruptcy and agrees to the following terms and conditions:

- The attorney fees for the Chapter 7 bankruptcy are \$600. This is a flat fee arrangement, and does not
  include the court costs, which are currently \$335. This is the total of your attorney fees, and Springer Law
  Firm will not charge you for additional work. However, if you refuse to cooperate, or fail to provide
  information as requested by our attorney, your case may be closed.
- 2. Fees paid to the firm become property of the firm upon payment. If before the case is filed, you decide to close out your case, Springer Law Firm will refund you any fees not earned. I assign to Springer Law Firm any amount paid towards court costs and filing fees. I authorize Springer Law Firm to transfer said funds to the firm's operating account if I decide not to file for bankruptcy, or if I breach this contract.
- 3. I agree to disclose all pertinent information to Springer Law Firm, so that the firm can properly disclose all my assets, debts, and financial history to the court. I agree to keep the firm informed on any new assets or debts I may incur from this date forward. If I do not provide the proper information, or do not cooperate with Springer Law Firm, said firm may withdraw from representation, with permission of the court.
- 4. I understand that I may not be able to protect all of my property. The bankruptcy code does not provide exemptions for everything, and as such, some of my property may be taken by the Trustee and sold.

  Additionally, if my income is too high, or if my income is not offset enough by my expenses, I understand that the Trustee may dismiss my case, or require me to file a Chapter 13 instead of a Chapter 7.
- 5. I understand that not all of my debts may be discharged in a Chapter 7 bankruptcy. Student loans, educational debts, undisclosed debt, support/maintenance, fines, debts incurred by fraud, future association/condo HOA dues, certain tax debts, or debts found non-dischargeable by a Judge are among the debts not dischargeable.
- 6. I understand that this retainer agreement is for bankruptcy representation only. Springer Law Firm will not represent me in any other case or legal matter, unless agreed to in a separate retainer agreement.
- I understand that before I transfer or sell any property, or incur any new debt, I will first notify Springer Law Firm and consult on the impact such action will have on my bankruptcy.
- 8. I understand that I must take 2 classes pertaining to financial management and credit counselling. Failure to take these courses will result in either my case NOT being filed, or if filed, possibly dismissed. If my case is dismissed, I understand that I will have to pay to have my case re-opened by Springer Law Firm.
- 9. I have received the 11 U.S.C. § 527(a) disclosures and have read them.

Dated:

Signature:

Print Name:

Attorney Signature:

Attorney Print:

Daine Manne

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### **United States Bankruptcy Court** Northern District of Illinois

In re	Terrance L. Pinkey Kiara Danielle Carter		Case No.	
		Debtor(s)	Chapter 7	
	VEF	RIFICATION OF CREDITOR M.  Number of		36
		Number of	Creditors:	30
	The above-named Debtor(s) l (our) knowledge.	hereby verifies that the list of credi	tors is true and correc	t to the best of my
Date:	July 3, 2018	/s/ Terrance L. Pinkey Terrance L. Pinkey		
Data	luly 2 2018	Signature of Debtor  /s/ Kiara Danielle Carter		
Date:	July 3, 2018	Kiara Danielle Carter  Kiara Danielle Carter		
		Signature of Debtor		

Americollect Inc 1851 S Alverno Road Manitowoc, WI 54221

Americollect, Inc. PO Box 1566 Manitowoc, WI 54221

Amex Po Box 297871 Fort Lauderdale, FL 33329

Capital One 15000 Capital One Dr Richmond, VA 23238

Chatara Lyles 817 West Street Rockford, IL 61102

Comenitybank/victoria Po Box 182789 Columbus, OH 43218

Comenitycb/mypointsrwd Po Box 182120 Columbus, OH 43218

Convergent Outsourcing 800 Sw 39th St Renton, WA 98057

Credit Acceptance Po Box 513 Southfield, MI 48037

Credit First N A 6275 Eastland Rd Brookpark, OH 44142

Credit One Bank Na Po Box 98875 Las Vegas, NV 89193 Creditors Protection Service Attn: Bankruptcy Dept. PO Box 4115 Rockford, IL 61101

Crusader Clinic Attn: Bankruptcy Dept. 1200 W. State St. Rockford, IL 61102

Financial Corporation of America 12515 Research Blvd, Bld 2, Ste 100 Austin, TX 78720

Harvard Collection Ser 4839 N Elston Chicago, IL 60630

Illinois Dcfs 509 S 6th St Springfield, IL 62701

Infinity Healthcare Physicians Attn: Bankruptcy Dept. 111 E Wisconsin Ave. Suite 2000 Milwaukee, WI 53202

IRS Centralized Insolvency Operation PO Box 7346 Philadelphia, PA 19101-7346

Kohls/capone N56 W 17000 Ridgewood Dr Menomonee Falls, WI 53051

Mercy Health System 1000 Mineral Point Avenue Janesville, WI 53548

National Credit Systems PO Box 312125 Atlanta, GA 31131 Navy Federal Cr Union Po Box 3700 Merrifield, VA 22119

Nissan-infiniti Lt 2901 Kinwest Pkwy Irving, TX 75063

Pediatrix Medical Group PO Box 120153 Grand Rapids, MI 49528

Radiology Consultants of Rockford Attn: Bankruptcy Dept. 1401 East State Street Rockford, IL 61104

RMH Pathologists Ltd. c/o Professional Billing 6785 Weaver Road, Suite D Rockford, IL 61114

Rockford Associated Clinical Path Attn: Bankruptcy Dept. PO Box 71082 Chicago, IL 60694

Rockford Health System Attn: Bankruptcy Dept. 2400 N Rockton Ave Rockford, IL 61103

Security Finance Central Attn: Bankruptcy Dept. PO Box 1893 Spartanburg, SC 29304

State Collection Service Attn: Bankruptcy Dept. PO Box 6250 Madison, WI 53701

Swedish American Health System Attn: Bankruptcy Dept. 1401 East State Street Rockford, IL 61104 Syncb/jcp Po Box 965007 Orlando, FL 32896

Syncb/toysrus Po Box 965005 Orlando, FL 32896

Syncb/walmart Po Box 965024 Orlando, FL 32896

U S Dept Of Ed/Gsl/Atl Po Box 4222 Iowa City, IA 52244

World Finance Company PO Box 6429 Greenville, SC 29606